

J.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Jim T. Glover Sr.		COURT CASE NUMBER	18 CV 1134
DEFENDANT	Dr. Tallman		TYPE OF PROCESS	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
	Dr. Tallman			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)			
	1200 ONTARIO Street Cleveland, OHIO 44113-1664			
Jim T. Glover Sr. 0236844 P.O. Box 5600 Cuyahoga County Corr. Center Cleveland, OHIO 44113-1664			Number of process to be served with this Form 285	2
			Number of parties to be served in this case	6
			Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Jim T. Glover Jr.			1-26-18

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 600	No. 100	Jim T. Glover Jr.	1/3/19

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date: 1/4/19 Time: 9:38 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm Signature of U.S. Marshal or Deputy: Jim T. Glover Jr.

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		0

REMARKS:

FedEx

DUPLICATE COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 4/2/15/80  
Automated 01/00

FILED



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774102849640**.

---

**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday		
	Adult Signature Required		

A handwritten signature in black ink, appearing to read "N. McDomal", is written over a background of a repeating "FedEx" logo pattern.

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**Shipping Information:**

<b>Tracking number:</b>	774102849640	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**

Dr. Tallman  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**

Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

Thank you for choosing FedEx.

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Jim T. Glover Jr.		COURT CASE NUMBER	1:18 CV 1134
DEFENDANT	Corporal Boardman		TYPE OF PROCESS	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN CORPARAL Boardman Cuyahoga County Correctional Center			
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 1200 Ontario Street <del>1134</del> Cleveland, OHIO <del>44113</del> 44113-1664			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW			Number of process to be served with this Form 285	2
			Number of parties to be served in this case	4
			Check for service on U.S.A.	<input checked="" type="checkbox"/>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of: Jim T. Glover Jr.	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 216) 801-0021	DATE 4-26-18
SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE			

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 100	District to Serve No. 100	Signature of Authorized USMS Deputy or Clerk [Signature]	Date 1/3/19
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date: 1/4/19 Time: 9:38 am

Signature of U.S. Marshal or Deputy  
[Signature]

Service Fee 8	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges 8	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) 0
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REMARKS:

FedEx

PRINT COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00

FILED

JAN -8 AM 11:32



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774102988514**.

---

**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday		
	Adult Signature Required		

A handwritten signature in black ink, appearing to read "N. McDomal", is written over a background of repeating "FedEx" logos.

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**Shipping Information:**

<b>Tracking number:</b>	774102988514	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**

Corporal Boardman  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**

Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

Thank you for choosing FedEx.

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	OF JUSTICE <b>1:18 CV 1134</b>	
DEFENDANT	TYPE OF PROCESS	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
SERVE AT	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)	
Mail worker of Cuyahoga County Corr Center 1200 Ontario Street - Cleveland, Ohio 44113-1664		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		
Jim T. Glover 0236844 P.O. Box 5600 Cleveland, Ohio 44113		
Number of process to be served with this Form 285 Number of parties to be served in this case Check for service on U.S.A.		

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Jim T. Glover Jr.			4-26-18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 100	No. 100	Jim T. Glover Jr.	1/8/19

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date: 1/4/19 Time: 9:38 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm Signature of U.S. Marshal or Deputy: Jim T. Glover Jr.

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		0

REMARKS:

FedEx

PRINT COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00

FILED

2019 JAN -8 AM 11:38  
U.S. DISTRICT COURT  
CLEVELAND



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774103007497**.

---

**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday		
	Adult Signature Required		



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**Shipping Information:**

<b>Tracking number:</b>	774103007497	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**  
Brian Hennessey  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**  
Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

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U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Jim T. Glover Jr.	COURT CASE NUMBER	1:18 CV 1134
DEFENDANT	Correctional Officer IRDIN	TYPE OF PROCESS	
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
SERVE AT	IRDIN, c/o Cuyahoga County Corr. Center		
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)			
1200 Ontario Street Cleveland OHIO 44113			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	2
Jim T. Glover Jr. 0236844 P.O. Box 5600 Cuyahoga County Corr. Center Cleveland, OHIO 44113		Number of parties to be served in this case	6
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Jim T. Glover Jr.			4-26-18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 60	No. 60	Jim T. Glover Jr.	1/2/19

I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date 1/4/19 Time 9:38 ☐ am ☐ pm

Signature of U.S. Marshal or Deputy

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		0

REMARKS:

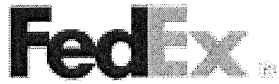
FedEx

PRINT COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774103314052**.

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**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday		
	Adult Signature Required		

A handwritten signature in black ink, appearing to read "N. McDomal", is written over a background of a repeating, faded FedEx logo pattern.

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**Shipping Information:**

<b>Tracking number:</b>	774103314052	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**

Correctional Officer Iroin  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**

Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

Thank you for choosing FedEx.

U.S. Department of Justice  
United States Marshals Service

PROCESS RECEIPT AND RETURN  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	JIM T. GLOVER SR.		RECEIVED DEPARTMENT OF JUSTICE 1:18 CV 1134	COURT CASE NUMBER	1134
DEFENDANT	Nurse LAGRACIA mental health/RN		TYPE OF PROCESS		
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN				
	NURSE LAGRACIA County Cuyahoga Corr. Center				
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)				
	1200 ONTARIO Street Cleveland, OH 44113-1664				
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW			Number of process to be served with this Form 285		2
JIM T. GLOVER SR. 0236844 P.O. BOX 5600 Cuyahoga County Corr. Center Cleveland, OH 44113-1664			Number of parties to be served in this case		6
			Check for service on U.S.A.		

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Jimmie Glover Jr.			1-26-18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 100	No. 100	Jimmie Glover Jr.	1/3/19

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete only different than shown above)	Date	Time
	1/4/19	9:38
	Signature of U.S. Marshal or Deputy	
	Jimmie Glover Jr.	

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		0

REMARKS:

FedEx

PRINT COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774103329938**.

---

**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday		
	Adult Signature Required		

A handwritten signature in black ink, appearing to read "N. McDomal", is written over a background of a repeating "FedEx" logo pattern.

---

**Shipping Information:**

<b>Tracking number:</b>	774103329938	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**  
Nurse LaGarcia  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**  
Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

Thank you for choosing FedEx.

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Jim T. Glover Jr.		COURT CASE NUMBER	1:18 CV 1134
DEFENDANT	Correctional Officer Neie		TYPE OF PROCESS	1
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
	OFFICER Neie of County Jail, Cuyahoga County Jail			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)			
	12000 Ontario Street CLEVELAND, OH			
Jim T. Glover Jr. P.O. Box 5600 Cuyahoga County Corr. Center Cleveland Ohio 44113	Number of process to be served with this Form 285		2	
	Number of parties to be served in this case		6	
	Check for service on U.S.A.			

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Jim T. Glover Jr.			1-26-18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 100	No. 100	James J. [Signature]	1/8/19

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date: 1/4/19 Time: 9:38 ☒ am ☐ pm

Signature of U.S. Marshal or Deputy: [Signature]

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		0

REMARKS:

FedEx

PRINT SCROLLS

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774103355626**.

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**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday		
	Adult Signature Required		

A handwritten signature in black ink, appearing to read "N. McDomal", is written over a background of repeating "FedEx" logos.

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**Shipping Information:**

<b>Tracking number:</b>	774103355626	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**

Correctional Officer Neic  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**

Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

Thank you for choosing FedEx.

U.S. Department of Justice  
United States Marshals Service

## PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF	Jim T. Glover Jr.	COURT CASE NUMBER	18 CV 1134
DEFENDANT	Corporal Robinson	TYPE OF PROCESS	2019 JAN 20 <sup>th</sup> 2nd shift
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN			
SERVE AT	Cuyahoga County Correctional Center		
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)			
1200 Ontario Street, Cleveland, OH 44113-1664			
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	2
Jim T. Glover Jr. 0236844 P.O. Box 5600 Cuyahoga County Correctional Center Cleveland, OH 44113		Number of parties to be served in this case	6
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
Jim T. Glover Jr.		214 801-0021	1-26-18

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk	Date
	1	No. 100	No. 100	[Signature]	1/8/19

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 1/4/19 Time 9:38 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy [Signature]

Service Fee	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
8			8		0

REMARKS:

FedEx

PRINT COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285  
Rev. 12/15/80  
Automated 01/00



January 7, 2019

Dear Customer:

The following is the proof-of-delivery for tracking number **774103389061**.

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**Delivery Information:**

<b>Status:</b>	Delivered	<b>Delivered to:</b>	Shipping/Receiving
<b>Signed for by:</b>	N.MCDOMAL	<b>Delivery location:</b>	1215 W 3RD ST CLEVELAND, OH 44113
<b>Service type:</b>	FedEx Express Saver	<b>Delivery date:</b>	Jan 4, 2019 09:38
<b>Special Handling:</b>	Deliver Weekday  Adult Signature Required		



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**Shipping Information:**

<b>Tracking number:</b>	774103389061	<b>Ship date:</b>	Jan 3, 2019
		<b>Weight:</b>	0.5 lbs/0.2 kg

**Recipient:**

Corporal Robinson  
Cuyahoga County Correctional Center  
1200 Ontario Street  
CLEVELAND, OH 44113 US

**Shipper:**

Susan Holland  
United States Marshals Service  
801 W Superior Ave  
#1200  
Cleveland, OH 44113 US  
1:18CV1134

**Reference**

Thank you for choosing FedEx.